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PTO/SB/21 (08-00)

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(to be used for all correspondence after initial filing)

Application Number	09/752,514
Filing Date	January 3, 2001
First Named Inventor	Klinefelter, Gary
Group Art Unit	1644
Examiner Name	Nolan, Patrick J.
Attorney Docket Number	ISA-013.03

ENCLOSURES (check all that apply)

- ☐ Fee Transmittal Form
 - ☐ Fee Attached
- ☐ Amendment / Response
 - ☐ After Final
 - ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/Incomplete Application
 - ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition Routing Slip (PTO/SB/69) and Accompanying Petition
- ☐ Petition to Convert to a Provisional Application
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- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

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- ☐ Appeal Communication to Board of Appeals and Interferences
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- ☐ Status Inquiry
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Remarks

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Firm or Individual name	Beth E. Arnold, Reg. No. 35,430
Signature	
Date	December 22, 2003

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PATENT
Attorney Docket No.: ISA-013.03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Klinefelter, Gary

Application No: 09/752,514

Filed: January 3, 2001

For: Method For Evaluating And Affecting Male
Fertility

Art Unit: 1644

Examiner: Nolan, Patrick J.

CERTIFICATE OF FIRST CLASS MAILING

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John Barretto

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P.O. Box 1450
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Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Revocation of Power of Attorney, Grant of New Power of Attorney, Change of Correspondence Address, and Change of Attorney Docket No. (2 pgs);
3. This Certificate of First Class Mailing (1 pg) and
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**REVOCATION OF POWER OF
ATTORNEY and APPOINTMENT
OF
NEW POWER OF ATTORNEY**

Application Number

09/752,514

Filing Date	January 3, 2001
First Named Inventor	Gary Klinefelter
Art Unit	1644
Examiner Name	Patrick J. Nolan
Attorney Docket Number	ISA-013.03

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:
A Power of Attorney or Authorization of Agent is submitted herewith.

OR

25181

I hereby appoint the practitioners at Customer Number :

Please change the correspondence address for the above-identified application to:

The address associated with

Customer Number:

25181

OR

Firm or Individual Name				
Address				
Address				
City				
Country		State		ZIP
Telephone		Fax		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Gary Klinefelter		
Signature	<i>Gary Klinefelter</i>		
Date	Dec. 19, 2003	Telephone	(919) 541-5779
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below*.			
*Total of 1 form are submitted.			

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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